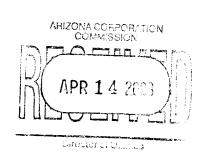
ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

R

WS-03898A Rancho Cabrillo Sewer Company 9532 East Riggs Road Sun Lakes AZ 85248



ANNUAL REPORT

EN 15 m.

FOR YEAR ENDING

12 31 2002

FOR COMMISSION USE

ANNO 5 02

COMPANY INFORMATION

Company Name (Business Name) _	Rancho Cabrillo Sewer Co	mpany
Mailing Address 9532 E Riggs Road		
(Street) Sun Lakes	AZ	85248
(City)	(State)	(Zip)
(480) 895-9200	(480)_ 895-4347	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		
Local Office Mailing Address 24607	5 Price Road	
	treet)	
Sun Lakes	AZ	85248
(City)	(State)	(Zip)
(480) 895-5009	(480) 802-9463	(602) 757-1548
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		

MANAGEMENT INFORMATION

Ianagement Contact:Jame	es Poulos	General Ma	nager
	(Name)	((Title)
9532 E Riggs Road	Sun Lakes	AZ	85248
(Street)	(City)	(State)	(Zip)
(480) 895-9200	(480) 895-4347		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No.	(Include Area Code)
mail Address			
C. B. M.			
on Site Manager: Dave Voc	orhees (Name)		
On Site Manager:		AZ	85248
0	(Name)	AZ (State)	85248 (Zip)
24607 S Price Road	(Name) Sun Lakes		(Zip)

Statutory Agent: Michael E Ti	ffany c/o Tiffany & Bosco P	A	
Statutory Agent: Michael E Ti	(Name)		
1850 N Central Ave #500	Phoenix	AZ	85004
(Street)	(City)	(State)	(Zip)
(602) 255-6000 Telephone No. (Include Area Code)	Fax No. (Include Area Code	Pager/Cell No.	(Include Area Code)
	`		
Attorney: Marty Aronson	(Name)		
One E Camelback Road	Phoenix	AZ	85012
(Street)	(City)	(State)	(Zip)
(602) 263–2972 Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
relephone No. (include Area Code)	Tax 1107 (monage 7 mon e = = = 7)		
OW	NERSHIP INFORMATIO	N	
Charle the following how that applies to a	vour company		
Check the following box that applies to	_		
Sole Proprietor (S)	C Corporation (C)) (Other than As	sociation/Co-op)
Partnership (P)	Subchapter S Cor	poration (Z)	
☐ Bankruptcy (B)	Association/Co op	(A)	
Receivership (R)	Limited Liability	Company	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county/ies i	n which you are certificated to pro	vide service:	
_ АРАСНЕ	☐ COCHISE	□ coc	ONINO
☐ GILA	☐ GRAHAM	GRE	ENLEE
☐ LA PAZ	X MARICOPA	□ МОН	IAVE
☐ NAVAJO	☐ PIMA	☐ PINA	L
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUM	A
☐ STATEWIDE			

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			

This amount goes on the Balance Sheet Acct. No. 108

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			

This amount goes on Comparative Statement of Income and Expense _____ Acct. No. 403.

BALANCE SHEET

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
,	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$	\$

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DESERBED OPEDITO		
251	DEFERRED CREDITS Unamortized Premium on Debt	6	Φ.
	Advances in Aid of Construction	\$	\$
252 255	Accumulated Deferred Investment Tax Credits		
233 271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		Φ.
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$	\$

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
No.			
461	Metered Water Revenue	\$	\$
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$	\$
	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power		
618	Chemicals		
620	Repairs and Maintenance		
621	Office Supplies and Expense		
630	Outside Services		
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		***
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$	\$
			144
	OPERATING INCOME/(LOSS)	\$	\$
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$	\$

	NET INCOME/(LOSS)	\$	\$
	1.2.2 11.001121(2000)	Ψ	Ψ

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate				
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$
Meter Deposits Refunded During the Test Year	\$

WATER COMPANY PLANT DESCRIPTION

WELLS

 (Feet) (Inche	eter (inches) es)	Drilled

• Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower Quantity		Quantity Standard Quantity Other	

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	1
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	

For the following three items, list the utility owned assets in each category.		
TREATMENT EQUIPMENT:		
STRUCTURES:		
	 	
OTHER:		

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2002

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
CCTOBER			
NOVEMBER			
DECEMBER			
	TOTAL	N/A	

is the water Utility loca	ted in an ADWK Active Management Area (AMA)?
() Yes	() No
Does the Company have	e An ADWR Gallons Per Capita Per Day (GPCPD) requirement?
() Yes	() No
If yes, provide the GPC	PD amount:
What is the level of arse: (If more than one well, please list ea	nic for each well on your systemmg/l

Note: If you are filing for more than one system, please provide separate data sheets for each system.

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported
Estimated or Actual Federal Tax Liability

State Taxable Income Reported
Estimated or Actual State Tax Liability

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances

Amount of Grossed-Up Tax Collected

Total Grossed-Up Contributions/Advances

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE DATE

Sim Poyles

PRINTED NAME

TITLE

COMPANY NAME Rancho Cabrillo Sewer Company	YEAR ENDING 12/31/2002			
PROPERTY TAXES				
Amount of actual property taxes paid during Calendar Year 2002 was: \$				
Attach to this annual report proof (e.g. property tax bills stamped "paid in fu property tax payments) of any and all property taxes paid during the calenda				
If no property taxes paid, explain why				

VERIFICATION AND SWORN STATEMENT

Intrastate Revenues Only

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STATE OF Arizona

I. THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)

Maricopa

NAME (OWNER OR OFFICIAL) TITLE

James Poulos <u>General Manager</u>

COMPANY NAME

Rancho Cabrillo Sewer Company

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA COPRORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 2002 12 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE **UTILITY OPERATIONS DURING CALENDAR YEAR 2002 WAS:**

Arizona IntraState Gross Operating Revenues Only (\$)

(THE AMOUNT IN BOX ABOVE **INCLUDES \$** IN SALES TAXES BILLED, OR COLLECTED

REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE **DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

4h DAY OF OFFICIAL SEAL TAMMY L. HOFFMAN Notary Public - State of Arizona MARICIDIA COUNTY My Comm. Expires Sept. 15/2003

SIGNATURE OF OWNER OR OFFICIAL

480-895-4257

TELEPHONE NUMBER

COUNTY NAME Maricopa

20つろ MONTH

SIGNATURE OF NOTAR

VERIFICATION AND

SWORN STATEMENT RESIDENTIAL REVENUE

VERIFICATION

INTRASTATE REVENUES ONLY

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PA	בחרת	the bound

ARIZONA CORPORATION

APR 1 4 2003

STATE OF ARIZONA

I, THE UNDERSIGNED

NAME (OWNER OR OFFICIAL)

NAME (OWNER OR OFFICIAL)

TITLE

James Poulos

COMPANY NAME

Rancho Cabrillo Sewer Company

OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2002

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BF A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE UTILITY OPERATIONS</u> RECEIVED FROM RESIDENTIAL <u>CUSTOMERS DURING CALENDAR YEAR 2002 WAS</u>:

ARIZONA INTRASTATE GROSS OPERATING REVENUES	(THI
\$	IN SA

(THE AMOUNT IN BOX AT LEFT INCLUDES \$ 0 IN SALES TAXES BILLED, OR COLLECTED

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SIGNATURE OF OWNER OR OFFICIAL

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

county NAME

May Copa

NOTARY PUBLIC NAME

, 20 03

THIS

OFFICIAL SEAL

My Comm. Expires Sept. 15, 2003

DAY OF

TAMMY L. HOFFMAN

Notary Public - State of Arizona
AL) MARICOPA COUNTY

MY COMMISSION EXPIRES 9-15-2003

SIGNATURE OF NOTARY PUBLIC